

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

Application or Docket Number:

10/501530

CLAIMS AS FILED - PART I

(Column 1)		(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	9 minus 20 =	
INDEPENDENT CLAIMS	1 minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

SMALL ENTITY  
TYPE

RATE	FEES	OTHER THAN OR SMALL ENTITY
BASIC FEE		OR BASIC FEE <input checked="" type="checkbox"/>
XS 9=		OR XS18= <input type="checkbox"/>
X43=		OR X86= <input type="checkbox"/>
-145=		OR -290= <input type="checkbox"/>
TOTAL		OR TOTAL <input type="checkbox"/>

OTHER THAN  
SMALL ENTITY OR SMALL ENTITY

RATE	ADDI- TIONAL FEE	OTHER THAN OR ADDIT. FEE
XS 9=		OR XS18= <input type="checkbox"/>
X43=		OR X86= <input type="checkbox"/>
+145=		OR +290= <input checked="" type="checkbox"/>
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE <input type="checkbox"/>

7/14/04 CLAIMS AS AMENDED - PART II

(Column 1)		(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	9	Minus	20 =
Independent	1	Minus	3 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE	ADDI- TIONAL FEE	OTHER THAN OR ADDIT. FEE
XS 9=		OR XS18= <input type="checkbox"/>
X43=		OR X86= <input type="checkbox"/>
+145=		OR +290= <input type="checkbox"/>
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE <input type="checkbox"/>

(Column 1)		(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	9	Minus	20 =
Independent	1	Minus	3 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE	ADDI- TIONAL FEE	OTHER THAN OR ADDIT. FEE
XS 9=		OR XS18= <input type="checkbox"/>
X43=		OR X86= <input type="checkbox"/>
+145=		OR +290= <input type="checkbox"/>
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE <input type="checkbox"/>

(Column 1)		(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR
Total	9	Minus	20 =
Independent	1	Minus	3 =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

OTHER THAN  
OR ADDIT. FEE

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.